224248 2009:256.T

ORS Revised 9-12-08

CLASS C AMENDMENT FORM

File the original with:	Mail or fax a copy to:
Public Service Commission of South Carolina Docketing Department Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 - 5100	S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815
FAX (803) 896-5199	(332,737 3323
DATE: 6-3-2010	
I have the following Certificate:	
Class C Taxi # 7204 Class C Charter	# Class C Charter Bus #
Class C Non-Emergency #	
Please consider this as my request for the following	ng amendment(s) to my Certificate:
Name Change (Complete the additional document included with this form for a name change ONLY if you are removing an individual's name from the certificated name. Otherwise throw the form	
away.)	
From: Dean GAVIN	DBA:
TO: Deon Latrell Gavin DI (New Name)	(Current DBA if applicable)
TO: Deon Latrell GAVIN DI	BA:
(New Name)	(New DBA if applicable)
Scope of Authority	
	То:
(Current Scope)	(New Scope)
Pagagnar Limit	
Passenger Limit	То:
From:(Current Limit Number)	(New Limit Number)
2	
Dean Latrell GALIN	905 Tumbleweed Vrive
(Name & DBA if applicable)	(Street and/or Mailing Address)
Cl	Seon & Nain
Plorence, 5C. 29506 (City, State, Zip Code)	(Signature)
(City, State, Zip Code)	(5.3)
843-409-3288	(Title)
(Telephone Number)	(Title)

CLASS C AMENDMENT FORM (This page is used only when asking for a name change)

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Docketing Department
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Transportation Department
1401 Main Street, Suite 900
Columbia, S.C. 29201
(803) 737-0578
FAX (803) 737-0815

Additional Information needed for a name change to a certificate

If a carrier has a certificate that has more than one individual's name listed as part of the certificated name, it is required that signatures from all individuals who wish to have their name removed be submitted with this request to the Public Service Commission.

By signing the following document, I authorize the request to have my name removed from this certificate.

Dean Latrell Gravin	Seon La Danie
Name of person requesting to have his/her name removed from the certificate	Person's signature and Date
Name of person requesting to have his/her name removed from the certificate	Person's signature and Date
Name of person requesting to have his/her name removed from the certificate	Person's signature and Date
Name of person requesting to have his/her name removed from the certificate	Person's signature and Date